

ONE STOP PERMITTING

CITY OF BIRMINGHAM
DEPARTMENT OF PLANNING, ENGINEERING & PERMITS
710 20th Street, North
ROOM 210, CITY HALL

William A. Bell, Sr.
Mayor

Andre V. Bittas
Director

Total valuation shall include the total cost of all work such as plumbing, elevator, escalator, electrical, fire protection, mechanical, paving, landscaping, grading, overhead and profit, engineering and architectural design fees, and be equivalent to the end cost of the project.

<div>BUILDING PERMIT APPLICATION</div> <div>P.I.D. No.: _____ Address Verified By: _____</div> <div>Modified Address: _____</div>	<div>Date _____</div> <div>Case No. _____</div> <div>Master No. _____</div> <div>Project No. _____</div>
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Please print or type legibly and fill in all that apply

Job Site Address: _____

Location: (floor, wing, suite, etc.) _____

Project Name _____

<div><input type="checkbox"/> PROPERTY OWNER</div> <div><input type="checkbox"/> TENANT</div> <div>NAME: _____</div> <div>ADDRESS: _____</div> <div>CITY/STATE/ZIP: _____</div> <div>PHONE:() _____ CELLULAR:() _____</div> <div>FAX:() _____ PAGER:() _____</div> <div>EMAIL: _____</div>	<div>STATE G.C. LICENSE NO. _____</div> <div><input type="checkbox"/> Contractor* <input type="checkbox"/> Developer* <input type="checkbox"/> Designer* <input type="checkbox"/> Engineer*</div> <div>NAME: _____</div> <div>COMPANY NAME: _____</div> <div>ADDRESS: _____</div> <div>CITY/STATE/ZIP: _____</div> <div>PHONE:() _____ CELLULAR:() _____</div> <div>FAX:() _____ PAGER:() _____</div> <div>EMAIL: _____</div> <div>*Applicant is required to be authorized by owner to undertake work</div>
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CONTACT PERSON: _____ ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE:() _____ CELLULAR:() _____

FAX:() _____ PAGER:() _____ EMAIL: _____

WORK TYPE: ☐ Addition ☐ Condemnation ☐ Moved ☐ New ☐ Alterations

CONTRACT VALUE \$ _____

DESCRIPTION OF WORK: _____

FOR STAFF USE

PERMIT TYPE: ☐ Residential ☐ Non Residential ☐ Parking Lot ☐ Repair

☐ Tent ☐ Temp Structure ☐ Fire Alarm ☐ Fire Extinguisher

☐ Fire Sprinkler ☐ AST/UST ☐ Paint Booth/Generator

TRADE PERMIT ☐ Yes ☐ No

PENALTY FEE ☐ Yes ☐ No

PENALTY FEE WAIVED ☐ Yes ☐ No

PERMIT FEE WAIVED ☐ Yes ☐ No

Code Edition _____

Report Code _____

OCCUPANCY TYPE:

Assembly Uses: <input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A4 <input type="checkbox"/> A5	Business Uses: <input type="checkbox"/> B	Educational Uses: <input type="checkbox"/>
Factory Uses: <input type="checkbox"/> F1 <input type="checkbox"/> F2	Hazardous Uses: <input type="checkbox"/> H1 <input type="checkbox"/> H2 <input type="checkbox"/> H3 <input type="checkbox"/> H4 <input type="checkbox"/> H5	
Group I Uses: <input type="checkbox"/> I1 <input type="checkbox"/> I2 <input type="checkbox"/> I3	Mercantile Uses: <input type="checkbox"/>	Mixed Uses: <input type="checkbox"/>
Residential Uses: <input type="checkbox"/> R1 <input type="checkbox"/> R2 <input type="checkbox"/> R3 <input type="checkbox"/> R4	Storage Uses: <input type="checkbox"/> S1 <input type="checkbox"/> S2	
	Utility & Miscellaneous Uses: <input type="checkbox"/>	

PEP2016-07-21

Please be aware that a separate fence/wall approval permit is required for a fence/wall being constructed or installed as a part of this construction project, whether currently or subsequently.

Do you intend to install a fence/wall as a part of this project? ☐ Yes ☐ No

If yes, please provide Fence Permit Number _____

CONSTRUCTION TYPE:			<input type="checkbox"/> IA	<input type="checkbox"/> IB	<input type="checkbox"/> IIA	<input type="checkbox"/> IIB	<input type="checkbox"/> IIIA	<input type="checkbox"/> IIIB	<input type="checkbox"/> IVHT	<input type="checkbox"/> VA	<input type="checkbox"/> VB
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Proposed Use:_____

Impact Fee No:_____

Building Sq. Ft.:_____ Largest Floor Area Sq. Ft.:_____ Construction Floor Area Sq. Ft.:_____

Building Hgt. Ft.:_____ Maximum Occupancy:_____ Change in Occupancy Type? ☐ Yes ☐ No

Number of Units:_____ Number of Stories:_____ Sprinkler: ☐ Yes ☐ No

UTILITIES:	Fire Suppression:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Electrical:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Mechanical:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Sprinkler:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Plumbing:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Fire Alarm:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fuel Tank:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Elevator:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Low Voltage:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Excavation:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

NOTE: All trade permits must be obtained by a licensed State of Alabama master card or certification holder for that required trade.

CERTIFICATION

I hereby certify that I have read this application and that all information contained herein is true. If any portion of this information, either intentionally or unintentionally, is false or is a misrepresentation of the material facts, the permit or process granted will be void. I further certify that if I am not the owner, I have proper authorization from the owner to act as representative on his/her behalf and that I may be required to provide written documentation of such authorization to the City of Birmingham.

If the valuation on a commercial project is \$50,000 and over, the contractor ***must*** have an Alabama General Contractors license.

If the valuation on a residential project is \$10,000 and over, the contractor ***must*** have an Alabama Home Builders license.

City of Birmingham **ORDINANCE NO. 07-199** requires that all newly constructed single-family houses and townhouses using Federal and/or City funds must meet minimum standards of visitability for persons with disabilities.

Are Federal and/or City funds being used for any portion of construction? ☐ Yes ☐ No

Signature (Applicant)

Date

Business License Number

FOR STAFF USE		
Comments_____		
By:_____		
Plans Examiner_____	Soil Erosion Permit No._____	Permit Cost \$_____
Clerk_____	Zoning_____	Receipt No._____